

Private Health Information Statement - General treatment policy

choosable 60 – teeth / eyes / wellbeing / muscle & bone

ahm health insurance

<http://www.ahm.com.au>

134 246

Monthly Premium

\$203.30 #

(before any rebate or insurer discount)

Covers two adults & dependants, including non-student dependants (3 or more people, only 2 of whom are adults)

Available in Western Australia

You may be entitled to an Australian Government rebate on the above premium. Your premium may also include an insurer discount. Check with your insurer for details.

This policy covers children, students up to and including the age of 30 and non-students up to and including the age of 30, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

General Treatment Cover

ahm Health Insurance does not operate a preferred provider scheme. Included Extras benefits apply to any recognised provider. See <https://members.ahm.com.au/find-a-provider>.

This policy  includes General treatment (Extras) cover for

Treatment	Waiting period (months)	Benefit limits (per 12 months unless otherwise stated)	Examples of maximum benefits
General dental	2	\$800 per person up to \$1,600 per policy (combined limit for general dental, major dental, endodontic & orthodontic) \$1,800 lifetime limit for Orthodontic	Periodic oral examination - 60% of charge Scale & clean - 60% of charge Fluoride treatment - 60% of charge Surgical tooth extraction - 60% of charge
Major dental	12		Full crown veneered - 60% of charge
Endodontic	12		Filling of one root canal - 60% of charge
Orthodontic	12		Braces for upper & lower teeth, including removal plus fitting of retainer - 60% of charge
Optical	6	\$250 per person up to \$500 per policy	Single vision lenses & frames - 60% of charge Multi-focal lenses & frames - 60% of charge
Non PBS pharmaceuticals	2	\$300 per person up to \$600 per policy (combined limit for non pbs pharmaceuticals, psychology, acupuncture, remedial massage, chinese medicine, dietetics/dietary advice, health management / healthy lifestyle, occupational therapy & other services)	Per eligible prescription - 60% of charge
Physiotherapy	2	\$400 per person up to \$800 per policy (combined limit for physiotherapy, chiropractic, exercise physiology & osteopathy)	Initial visit - 60% of charge Subsequent visit - 60% of charge
Chiropractic	2		Initial visit - 60% of charge Subsequent visit - 60% of charge
Psychology	0	Combined limit - see Non PBS pharmaceuticals	Initial visit - 60% of charge Subsequent visit - 60% of charge
Acupuncture	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 60% of charge Subsequent visit - 60% of charge
Remedial massage	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 60% of charge Subsequent visit - 60% of charge
Chinese medicine	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 60% of charge Subsequent visit - 60% of charge
Dietetics/dietary advice	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 60% of charge Subsequent visit - 60% of charge

Exercise physiology	2	Combined limit - see Physiotherapy	Initial visit - 60% of charge Subsequent visit - 60% of charge
Health management / Healthy lifestyle	2	Combined limit - see Non PBS pharmaceuticals	Health management - 60% of charge
Occupational therapy	2	Combined limit - see Non PBS pharmaceuticals	Initial visit - 60% of charge Subsequent visit - 60% of charge
Osteopathy	2	Combined limit - see Physiotherapy	Initial visit - 60% of charge Subsequent visit - 60% of charge

This product also includes: Hypnotherapy and counselling. Also includes Health Improvement Benefits including: yoga class and courses, Pilates class and courses, quit smoking, disease management association fees, Cancer Council UV products, stress management courses, preventative tests, scans and screenings, health checks, exercise classes, swimming lessons (for ages 0-17 years). Conditions and annual limits apply. Please refer to product guide for more details.

This policy ✗ does not include General treatment (Extras) cover for

✗ Blood glucose monitors	✗ Podiatry
✗ Hearing aids	✗ Other treatments - check with your insurer

Ambulance cover

In Western Australia this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Call-out fees: will be paid for each attendance, including emergency treatment without transport to hospital.

Other features of this ambulance cover

Unlimited benefits for medically necessary ambulance trips to the nearest hospital that is able to provide the level of care you require. TAS and QLD have State schemes to cover ambulance services for residents of those States.

Disclaimer

The information contained in this Private Health Information Statement was provided by the insurer and is intended as general information. It may not take into account your particular circumstances. For information please contact the insurer.